

MS-A11's EXB3

INMATE REQUEST SLIP

CCT 21 2013

Submit this request to the Unit Supervisor, Security Lieutenant, or CC/CM. Your Unit Supervisor, Security Lieutenant, or CC/CM will help you resolve the issue or it will be forwarded to the appropriate person. Unit Supervisor, Security Lieutenant, or CC/CM will be forwarded to you.

TO: Unit Supervisor, Security Lieutenant, CC/CM

DATE: 10/17/13

FROM: Ali Dominic S
 Last Name Dominic First Name S
 Middle Initial
NCF Facility B Housing Unit 30 Cell
 Work/Shift

INMATE REQUEST: Dear Mr. Wrenn,

I am an inmate at the NCF Berlin, having issues with meals been prepared with by the NCF meal room. Every since filing up my legal action for meal preparation being tampering with my meals. The second issue is the diet food during Ramadan and after. Every Ramadan we as Muslim keep having the same issues with our meals, not been cook properly. We then other men served to the population, etc. and it continue as today has own park dietary. With these two issues I requested you NCF warden to take action but so far, nothing seems to stop - would please take of these issues.

(If you need more space, use plain paper.)

Thank YouAli Dominic
Inmate SignatureTO: William Wrenn, DOC Commissioner DATE:

FROM: Unit Supervisor, Security Lieutenant or CC/CM

REMARKS:

Staff Signature

FROM: Chairperson, Office of the Commissioner
Staff Member Name/Office

DATE: 10/18/13

REMARKS: Mailing labels are not authorized property and therefore contraband. Your mail was handled within policy.

Chris Karch
Staff Signature

Received By

Randy Dean
Inmate Signature



*All is EX
B3*

GRIEVANCE FORM

(See Reverse For Instructions)

DEPARTMENT OF CORRECTIONS
STATE OF NEW HAMPSHIRE
P.O. Box 14
CONCORD, NEW HAMPSHIRE 03302

MARGARET W. HASSAN
GOVERNOR

B block
WILLIAM L. WRENN
COMMISSIONER

2. GRIEVANT: Diane
 4. Address: ALF 133 C Avenue St. No. 14, RR 3, T 76
 5. Brief Description of Grievance.

*Dear Sir or Madam, I am writing to you regarding our treatment
 we are today several weeks past our due date cleaning utensils.
 For the last three days we have been getting very little rest
 because we are now as other inmates by fire, out dated,
 and this has not been just 3 days. We come down to the incomplete
 staff and you can care take is not enough information! and
 hence we refuse that this one is true as per instructions of the N.H.
 Department of Public Health Standard set of hygiene & labor to
 see page (1)*

1. Date: 11-1-13
 3. Number: 71619

Signature: M. Hassan

(You will be penalized if statement is untrue)

(Use Attachments if necessary.)

To: DIRECTOR (Warden)

Date of Director's Action 11-1-13

Director's Action:

Director's Action: I AM IN THE PINK

Authentication _____

To: COMMISSIONER

Date of Commissioner's Action: _____

Commissioner's Action _____

Commissioner's Action: I AM IN THE PINK

Authentication _____

(FORWARD ALL THREE COPIES WHITE WILL BE FILED IN OFFENDER RECORDS, CANARY TO RESPONDER AND PINK TO GRIEVANT.)